PTO/SB/01 (08-03)
Approved for use through 07/31/2006. OMB 0651-0032
U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it contains a valid OMB control number. Attorney Docket Number

DECLARATION FOR UTILITY OR

DESIGN			First Name	d Inventor	Ro	YN	KARAM			
PATENT APPLICATION			COMPLETE IF KNOWN							
(37 CF	Application	Number								
Declaration	Declara	tion	Filing Date							
Submitted OR With Initial	Filing (s	ted after Initial surcharge	Art Unit							
Filing	(37 ČFI require	R 1.16 (e))	Examiner N	lame	-					
	***				-	-				
I hereby declare that:										
Each inventor's residence, mailing address, and citizenship are as stated below next to their name.										
I believe the inventor(s) named below to be the original and first inventor(s) of the subject matter which is claimed and for										
which a patent is sought on the invention entitled: IMPROVED 10 SI ALTERNATOR HOUSING TO ACCOMODATE										
LARGER IMPROVED HEAVY DUTY 175I RECTIFIER										
(Title of the Invention)										
the specification of which										
is attached hereto										
OR			_							
was filed on (MM/DD/Y	YYY)		as Unit	ted States Ap	plication No	umber or PC	T International			
						·				
Application Number and was amended on (MM/DD/YYYY) (if applicable). I hereby state that I have reviewed and understand the contents of the above identified specification, including the claims, as										
amended by any amendment			of the abo	ve identified s	specification	n, including tr	ne claims, as			
I acknowledge the duty to dis	sclose informati	tion which is materi	ial to pate	entability as	defined in :	37 CFR 1.56	S, including for			
continuation-in-part application and the national or PCT intern	ns, material info	ormation which beca	ame avail	able between						
I hereby claim foreign priority	benefits unde	r 35 U.S.C. 119(a)-	(d) or (f),	or 365(b) of						
inventor's or plant breeder's rights certificate(s), or 365(a) of any PCT international application which designated at least one country other than the United States of America, listed below and have also identified below, by checking the box, any foreign										
application for patent, inventor before that of the application o			te(s), or a	ny PCT inter	national app	plication havi	ng a filing date			
Prior Foreign Application		Foreign Filing		Prior			py Attached?			
Number(s)	Country	(MM/DD/YYY	Υ)	Not Cla	<u>iimed</u>	Yes	No			
<i>:</i>				<u> </u>]		片ㅣ			
				F			H			
] 					
Additional foreign applicat	ion numbers or	e listed on a supple	mental nri	ority data sho	of PTO/SP	/02B attache	d hereto			
Additional foreign application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto.										

[Page 1 of 2]

This collection of information is required by 35 U.S.C. 115 and 37 CFR 1.63. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 21 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

PTO/SB/01 (08-03)
Approved for use through 07/31/2006. OMB 0651-0032
U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE
Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it contains a valid OMB control number.

DECLARATION — Utility or Design Patent Application

Direct all correspondence to:	Customer Number:	:		OR 🖂	Corres	pondence address below			
	N KARA	M							
Address 506 QUANCE AVE.									
SASKATOON			State SK,			57H-3B4			
CANADA	306	ne 5477 5) 244	<u>-9812</u>	8		244-2223			
I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001 and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.									
NAME OF SOLE OR FIRST INVENTOR: A petition has been filed for this unsigned inventor									
Given Name (first and middle [if any])	ROY N	5		Family Name or Surname		ARAM			
Inventor's Signature	I Konom,					Date NOV24/03			
Residence: City SASKATOON	State SK.		COuntry	NADA	Citizer				
Mailing Address 506 QUANCE AVE.									
SASKATOON	State SK.		Z	\$7H-31	34	CAVADA			
NAME OF SECOND INVENTO	PR:			A petition has be	en filed f	for this unsigned inventor			
Given Name (first and middle [if any])				Family Name or Surname					
Inventor's Signature						Date			
Residence: City	State		Country		Citizer	nship			
Mailing Address									
City	State		ZIF	P	Count	ry			
Additional inventors or a legal re	presentative are being named on	the s	supplemental	l sheet(s) PTO/SB/02	 :A or 02LR :	attached hereto.			